

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. **10824560**

FILING DATE **4-15-04**

APPLICANT(S)

CLAIMS

	AD FILZD		ADJUDICAT ASSESSMENT		ADJUDICAT ASSESSMENT	
	CHD	DEP	CHD	DEP	CHD	DEP
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50						
TOTAL IND.	2					
TOTAL DEP.	9					
TOTAL CLAIMS	11					

	AD FILZD		ADJUDICAT ASSESSMENT		ADJUDICAT ASSESSMENT	
	CHD	DEP	CHD	DEP	CHD	DEP
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